EXHIBIT I BUILDING CASUALTY LOSS NOTIFICATION

Internal Revenue Code Section 42(j)(4)(E) states that buildings which are allocated tax credits are protected from recapture of credits due to a casualty loss to the extent such loss is restored by reconstruction or replacement within a reasonable period. Low-Income Housing Credit Owners must report to THDA the casualty loss of a building within 30 days of the loss. Complete a separate form for each building and submit to the address below:

Compliance Department Internal Audit Division Tennessee Housing Development Agency 404 James Robertson Parkway, Suite 1114 Nashville, Tennessee 37243-0900

BUILDING AFFECTED Building Identification	tion No. (BIN):	TN
Name of Project:		
Address of Project:		
City:	State:	Zip Code:
Owner:		
Owner's Taxpayer Identification No.:		
Address:		
City:	State:	Zip Code:
General Partner:		
Telephone:		
The undersigned hereby certifies that the information presented herein is true and correct to the best of his/her knowledge. He/she further certifies under penalty of perjury that the project meets the requirements of Internal Revenue Code Section 42. He/she understands that false statements are punishable as a Class E felony under Tennessee Code Annotated Section 13-23-133 and are also punishable under other applicable federal statutes.		
Date of Loss:	Total Loss:	Partial Loss:
No. of Low-Income Units Affected:	No. of Low-Inco	ome Households Displaced:
Write a brief description of the loss. Identify any causes of the loss. Attach a separate page if needed.		
Estimated Time for Replacement:	Applicable	Fraction at Prior Year End:
Signature of Owner	•	Date